

## Suicide Prevention Panelists Aim to Save Lives

Everyone in the room had a strong and striking connection to suicide. Whether it was the mom whose son tried many times to take his life or the young woman who struggled to find reasons to stay alive or the school counselor who wanted to learn more about suicide prevention so that she could try to save a life.

“One of the really important projects that we’re working on – and one I have the deep humility to be in a position to help support -- is to develop a suicide prevention plan for the state of California,” said Ashley Mills of the California Mental Health Services Oversight and Accountability Commission in opening the session. “There are many critical conversations happening at this moment, but for me this is just the most important one. The more we can keep people alive, the more chance we have to intervene and to connect them with this very beautiful life that’s all around us.”

The impassioned panel discussion took place May 17 at a standing-room only workshop at the California Mental Health Advocates for Children and Youth Annual Conference at Asilomar in Pacific Grove, CA. Christina Parker and Cecelia Najera served on the Suicide Prevention panel moderated by Nadia Ghaffari, a senior at Los Altos High School in the Bay Area. Ghaffari described her connection with suicide prevention and intervention.

“I first got involved in mental health advocacy from my own personal experience when my best friend two years ago attempted suicide,” Nadia said. “On the night of her suicide attempt she reached out to one person and that one person was me. I was able to call 911 and thankfully she lived through that night. From that experience, just having someone so close to you hurt so much, you’re also personally affected.”

Participants included representatives from schools, counties, advocacy groups, parents and youth and private and public agencies from throughout the country. All participants expressed a sincere desire to help youth who have attempted suicide or who have had suicide ideation. Many participants said that they had seen alarming upward trends in students trying to take their lives in recent years, many of those students as young as in elementary school.

The discussion covered various facets of suicide prevention, including encouraging people to have honest and open conversations about suicide and to not be afraid to ask for help. Some said that stigma and labels associated with mental illness also need to be addressed. The language used to discuss mental health or to describe a person in crisis can also be problematic, some said. All agreed that there isn’t a single way to approach the issue because all individuals have different backgrounds and different life experiences.

“I know that a lot of times you try to address mental health one sided, this way,” Christina said. “But there are so many different elements to it, so many different complexities to it. That’s the hardest part in really truly addressing mental health illnesses is that how you address her (pointing to Cecelia) can’t be how you address me. How do we build a space where building mental health services where we’re being proactive, we’re being reactive and really structuring services around someone’s cultural and religious background and the background of their (individual) households.”

Many described poor and harsh treatment at the hands of law enforcement officers who are not always trained on how to deal with individuals experiencing a mental health crisis. They said they're treated like criminals and sent to institutions when they in fact need medical attention.

"All in all, I was 5150'd, 5250'd about 24 times," said Leilani Perry. "And it just seemed crazy to me when I think about it because I understand I'm going through these things and it's your protocol to send me here to get help, but if it didn't work the first time, the second time, the fifth time then why do you keep sending me to these places? It didn't help, so why are you still sending me there? It just made me feel worse about myself."

Section 5150 is a section of the California Welfare and Institutions Code, which authorizes a qualified officer or clinician to involuntarily confine a person suspected to have a mental disorder that makes them a danger to themselves, a danger to others, or gravely disabled. Section 5250 allows a qualified officer or clinician to involuntarily confine a person deemed to have certain mental disorders for up to 14 days.

Christina encouraged young people to get involved in music, in poetry, in theater arts and to partake of the many different resources that can help individuals focus on other things and get their minds off suicidal thoughts. Let the patients and the youth recommend activities and schedules to follow when they're institutionalized, Leilani added.

The participants exchanged many good ideas and some of those ideas will continue to be explored in future suicide prevention meetings. Another Commission Suicide Prevention Subcommittee meeting took place in Sacramento on May 23. The next one will be held on June 13 in San Diego.

"Suicide risk is a vital sign," Ashley Mills said. "It is just as important as blood pressure. It is just as important as cholesterol. We need to be checking in with one another before someone gets to a crisis."

Many of the youth participants are also involved in various advocacy groups and serve as peer support for other youth.

The workshop spurred many emotions and strangers exchanged tears and hugs at the end.

"Everyone here that I've heard is really trying to help us," Leilani said, fighting back tears, which eventually flowed freely.